

# Change Request Form

## 1 General Information

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<b>Change Request Name</b>	License reverification report modification	<b>Date</b>	11/17/2017
<b>Prepared by</b>	Meghna Patel – Dept. of Health; Lara Hudson Irvin - Appriss	<b>Change control #</b>	0002

## 2 Requestor Information

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***Proposed Change Description and References:***

The Pennsylvania DOH, Prescription Drug Monitoring Program is interested in adding additional columns for DEA Pass/Fail and License Pass/Fail to the existing monthly license reverification report.

***Justification:***

The purpose of this enhancement is to identify the specific reason the user account failed verification. This is important so the program office ensures accurate users have the access to the PA PDMP system

***Impact of Not Implementing Proposed Change:***

Risk of allowing a non-authorized user access to the PA PDMP system if their credentials are expired. Increased administrative work to identify why a licensed user could not be reverified.

***Alternatives:***

No satisfactory alternatives

**Priority:**  **High**    **Medium**    **Low**

***Who will test (job classification and/or person):***

Appriss Engineering and QA team, PA PDMP Program Office

***Context Sensitive Help Update Needed?***    **Yes**    **No**

### 3 Initial Review Results of the Change Request

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Initial Review Date:	10/13/2017	Assigned to:	Lara Hudson
<input checked="" type="checkbox"/> Approve for Impact Analysis			
<input type="checkbox"/> Reject			
<input type="checkbox"/> Defer Until:			
Reason:			
Priority Classification:	<input checked="" type="checkbox"/> HIGH	<input type="checkbox"/> MEDIUM	<input type="checkbox"/> LOW

### 4 Initial Impact Analysis

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Cost / Schedule Impact Analysis Required?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
<b>Impact on Cost:</b> Deliverables include initial design, test plan, post-development design, test report and production deployment report.		

Deliverables/Cost Breakdown:

Review Date: 11/17/2017
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Project Phase	Role Title	Rate Per Hour	Hours	Cost	Delivery Timeline
<b>Initial Design</b>					12/13/2017
	Business Analyst	\$69.00	5	\$345.00	
	Product Manager	\$138.00	1	\$138.00	
	Software Architect	\$161.00	4	\$644.00	
	Software Engineer	\$138.00	19	\$2622.00	
<b>Subtotal</b>			<b>29</b>	<b>\$3749.00</b>	
<b>Test Plan</b>					12/18/2017
	Quality Assurance Engineer	\$92.00	8	\$736.00	
	Software Engineer	\$138.00	4	\$276.00	
<b>Subtotal</b>			<b>12</b>	<b>\$1012.00</b>	
<b>Post-Development Plan</b>					12/20/2017
	Business Anaylst	\$69.00	1	69.00	
	Product Manager	\$138.00	.5	69.00	
	Software Engineer	\$138.00	1	\$138.00	
	Quality Assurance	\$92.00	1.5	\$184.00	
<b>Subtotal</b>			<b>4</b>	<b>\$460.00</b>	
<b>Test Report</b>					12/22/2017
	Software Engineer	\$138.00	0.5	\$69.00	
	Quality Assurance Engineer	\$92.00	0.5	\$46.00	
<b>Subtotal</b>			<b>1.0</b>	<b>\$115.00</b>	
<b>Deployment Report</b>					12/27/2017
	Software Engineer	\$138.00	1	\$138.00	
	Quality Assurance Engineer	\$92.00	1	\$92.00	
<b>Subtotal</b>			<b>2</b>	<b>\$230.00</b>	
			<b>Total Cost:</b>	<b>\$7200.00</b>	
			<b>Total Hours:</b>	<b>48</b>	

## 5 Impact Analysis Results

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### *Specific Requirements Definition*

#### **High Level Requirements:**

1. Add two additional columns: LicenseNumberPassFail and DEANumberPassFail to the existing monthly reverification report. This will help the PA PDMP administrators identify what could not be validated.
2. Reverification shall check to verify that the DEA number, Employer DEA number and License number are still active.
3. Reverification report fields to be displayed:
  - a. Role
  - b. FirstName
  - c. LastName
  - d. MiddleName
  - e. DateOfBirth
  - f. Address1
  - g. Address2
  - h. City
  - i. State
  - j. Zip
  - k. WorkPhone
  - l. Email
  - m. DEANum
  - n. EmployerDEANum
  - o. LicenseNumber
  - p. DEANumberPassFail
  - q. LicenseNumberPassFail
  - r. Processing Status
4. All columns of the report shall be sortable and filterable
5. Name match check shall not be performed during the reverification process.
6. The following roles shall be included in the reverification process:
  - a. Physician
  - b. Dentist
  - c. Nurse Practitioner / Clinical Nurse Specialist
  - d. Midwife with Prescriptive Authority
  - e. Physician Assistant
  - f. Podiatrist (DPM)
  - g. Optometrist
  - h. Pharmacist
    - i. Pharmacist role does not have a personal DEA number and therefore will not require validation of the personal DEA number field. Instead, the employer DEA field shall be validated.
  - i. Medical Resident

7. Reverification report to be scheduled and delivered the first week of each month via electronic mail.
8. The following individuals shall be included in the reverification report distribution list:
  - a. Meghna Patel, DOH [REDACTED]
  - b. Jared Shinabery, DOH [REDACTED]
  - c. Carol Runk (Health), DOH [REDACTED]
  - d. Kristen Figueroa , DOH [REDACTED]
9. PA PDMP administrators will note requested actions for each user account and return to Appriss.
10. Appriss will deactivate the final list of identified users who did not pass the reverification within 1 week after receiving confirmation from the PA PDMP administrators.
11. Once PA PDMP administrators are comfortable with the reverification report, Appriss will begin to automatically deactivate identified users who did not pass the reverification moving forward. The reverification reports must still be generated and provided to the PA PDMP administrators.
12. Appriss shall email all users who did not pass reverification at the time of deactivation to notify them of why they are being deactivated and the steps that need to be taken to reactivate their account. Messages should be distinct based on why the user did not pass validation. The message should also inform the user that if they have delegates, their delegates can no longer run reports on their behalf. The final messaging must be approved by the PA PDMP.
13. Exclude all accounts where @va.gov is contained in the e-mail address.

**Assumptions:**

Reverification process will follow the Licensing Integration Document Web Service Specifications.

Reverification report will continue to be provided during first week of each month.

**Excluded from scope:**

1. SSN will not be included in the reverification.
2. No changes to current system verification process
3. Report will not include pass/pass reverifications

***Impact of Not Implementing the Change:***

Risk of allowing a non-authorized user access to the PA PDMP system if their credentials are expired. Increased administrative work to identify why a licensed user could not be reverified.

***Alternatives to the Proposed Change:***

No alternatives

***Final Recommendation:***

Enhance the existing monthly reverification report
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## **6 Approvals**

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Signature \_\_\_\_\_

Signature \_\_\_\_\_

Name Meghna Patel

Name Patrick Keating

Director, Prescription Drug  
Monitoring Program  
Office, PA Department of  
Health

Chief Information Officer,  
PA Department of Health

Date

Date

Appriss Inc. Authorization:

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Signature

Name: Rob Cohen

Title: President, Appriss Health Inc.

Date: